

Indiana State Police Clandestine Laboratory Occurrence Report

This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date: 03-06-2014

Address: 7715 E 750 N

Incident #: 14ISPC001881

HOWE, IN

County: LAGRANGE

46746

Type of Laboratory Seizure (check one)

- ☒ Operational Lab
☐ Chemical/Glassware/Equipment (only)
☐ Dumpsite (only)

Seizure Location (check all that apply)

- ☒ Residence ☐ Hotel/Motel
☐ Outbuilding ☐ Open – No Structure
☐ Vehicle ☐ Other: _____

Items Found: Location (bedroom, kitchen, open air, etc)

(check all that apply)

- ☒ One Pot or Birch Reaction(s): KITCHEN
☐ Red Phosphorous/Iodine Reaction(s): _____
☒ Hydrochloric Acid Gas Generator(s): KITCHEN
☐ Flammable Solvents: _____
☐ Water Reactive Metal (Lithium): _____
☐ Anhydrous Ammonia: _____
☒ Corrosive Acid: KITCHEN
☐ Corrosive Base: _____
☐ Other (item and location): _____

Vehicle Information:

Owner:

Make:

VIN:

Model:

Year:

Child under age 18 discovered (check appropriate)

- ☐ Yes _____ (number present)
☐ No
☐ Children not present but evidence they reside
or visit often

Living conditions of home: ☐ clean ☐ disarray
☐ unclean

Estimated length of time manufacturing had been
occurring: _____

Additional Information: _____

This report has been faxed* or emailed to the following agencies that serve the location:

Fire Department City, Township or County MONGO FIRE

Fax: E-MAILED

Health Department County: LAGRANGE CO

Fax: _____

Department of Child Services Hotline: dcshotlinereports@dcsc.in.gov Fax: 317-234-7595 or 317-234-7596

For further information regarding this methamphetamine laboratory, contact

Investigating Officer: ANDREW SMITH Phone 260-432-8661

*This form is to be faxed to the Fire Department, Health Department and/or Department of Child Services listed within 24 hours of scene processing.